NAVAJO NATION LIMITED LIABILITY COMPANY ACT

APPLICATION FOR REGISTRATION OF A
LOW-PROFIT LIMITED LIABILITY COMPANY

1. The name of the low-profit limited liability company L3C is:

______________________________________________________________________________________

1.a. If the exact name of the L3C is not available for use in the Navajo Nation, then the
fictitious name adopted for use by the L3C in the Navajo Nation is:

______________________________________________________________________________________

2. The company is organized for a business purpose that satisfies and at all times operates
to satisfy each of the requirements under Title 5 N.N.C. §3620A.

3. The date of the company's formation is:

4. The purpose of the L3C or the general character of business it proposes to transact in the
Navajo Nation is:

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

5. The name, street address and mailing address of the initial agent for the L3C within the
Navajo Nation is:

Name: ____________________________________________________________

Address: _________________________________________________________

City: __________________________ State: _______ Zip Code: ________

Street Address: ___________________________________________________

ACCEPTANCE OF APPOINTMENT BY STATUTORY AGENT

I __________________________________, having been designated to act as Statutory Agent,
(Print Name)
hereby consent to act in that capacity until removed or resignation is submitted in
accordance with the Navajo Nation Low-Profit Limited Liability Company Act.

Signature: ________________________________________________________

CD-63-14 (12/29/14)
6. Management Structure: (select option A or B)

A. □ Management of the L3C is vested in a manager or managers. The names and addresses of each person who is a manager AND each member who owns a twenty percent or greater interest in the capital or profits of the L3C are:

   Name: ________________________________
   Name: ________________________________
   □ member □ manager □ member □ manager
   Mailing Address: ________________________ Mailing Address: ________________________
   City, State, Zip: ________________________ City, State, Zip: ________________________
   Street Address: ________________________ Street Address: ________________________

   Name: ________________________________
   Name: ________________________________
   □ member □ manager □ member □ manager
   Mailing Address: ________________________ Mailing Address: ________________________
   City, State, Zip: ________________________ City, State, Zip: ________________________
   Street Address: ________________________ Street Address: ________________________

B. □ Management of the L3C is reserved to the members. The names and addresses of each person who is a member are:

   Name: ________________________________
   Mailing Address: ________________________
   City, State, Zip: ________________________
   Street Address: ________________________

   Name: ________________________________
   Mailing Address: ________________________
   City, State, Zip: ________________________
   Street Address: ________________________

7. The street and mailing address and phone number of its designated office:

   Mailing Address: ________________________ Phone Number: ________________________
   City, State, Zip: ________________________
   Street Address: ________________________

8. The street and mailing address and phone number of the initial designated office in the Navajo Nation.

   Mailing Address: ________________________ Phone Number: ________________________
   City, State, Zip: ________________________